ALABAMA STATE COUNCIL ON THE ARTS
FINAL REPORTING FORMS B-3
Grants to Individuals or Technical Assistance Grants

B-3

Use this form to report final expenditures for Grants to Individuals
or to report final expenditures for Technical Assistance Grants

INSTRUCTIONS

The forms in this packet are for use by individuals. Use FINAL REPORT FORM A if you are reporting expenditures for an organization or a school or for project grants, program development grants, general operating support grants, presenting grants or arts in education grants.

Print or type the requested information.

REMINDERS

Final reports are due thirty (30) days following the completion of the funded project or activity and no later than September 30. If for any reason you may be filing your report after September 30, you must make advance arrangements with your program manager by September 1. Otherwise, funds may not be available if your final report is received after September 30.

We cannot process additional grants for you if you fail to file a final report and you will be ineligible for future grants until a final report is received.

Final Report Processing
Alabama State Council on the Arts
201 Monroe Street, Suite 110
Montgomery, AL 36130-1800

ALABAMA STATE COUNCIL ON THE ARTS
STAFF DIRECTORY

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General Email: staff@arts.state.al.us
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ALABAMA STATE COUNCIL ON THE ARTS
FINAL REPORTING FORMS B-3
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1. Name:

2. 2. Social Security Number:

3. 3. Grant Award Number:

4. Program Identification Number:

5. Grantee Race/Ethnicity: We have been asked to collect the following information and report the data to the National Endowment for the Arts as a part of our final report of federal fund expenditures. The information is for statistical purposes. If you have any questions or wish additional information, please call your program manager.

Which of the following most closely identifies your race/ethnicity:

- ☐ (N) American Indian/Alaskan Native
- ☐ (A) Asian/Pacific Islander
- ☐ (B) Black, not Hispanic
- ☐ (H) Hispanic
- ☐ (W) White, not Hispanic
- ☐ (M) Multi-Racial (combination of those above if no single race applies)

6. Briefly describe the project or activity undertaken with this grant, its successes, and not any aspects that differ from the application.

7. In what community did your project or activities take place?

8. Were additional people (such as artists, the general public or students) affected by your project? If so, please identify the groups and explain their involvement. Please estimate the total number of people affected by this grant_____.

9. Attach any newspaper articles or other information about your apprenticeship.

9. Request for payment

       Name:

       Social Security Number:

       Total Grant Award: $

       Total Grant Expenditures: $

       Amount Received to date: $

       Balance Requested: $

11. **Certification:** I certify that the foregoing information is true and correct and that expenditures were incurred solely for the purpose of the above referenced grant.

_____ _____ _____
Print Name   Signature   Date

Date Final Report Received	_____
Program Manager Review	_____
Approved for Payment	_____

Please complete the duplicate form (with signatures) immediately following.
Copy 1 (ASCA Grant Files)   Copy 2 (State Comptrollers Office for Payment Processing)

Copy 1 (ASCA Grant Files)

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8. Were additional people (such as artists, the general public or students) affected by your project? If so, please identify the groups and explain their involvement. Please estimate the total number of people affected by this grant_____.

9. Attach any newspaper articles or other information about your apprenticeship.

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        Total Grant Expenditures: $

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_____ _____ _____

Print Name   Signature   Date

Date Final Report Received   _____

Program Manager Review   _____

Approved for Payment   _____

Please complete the duplicate form (with signatures) immediately following.
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